

7. RIGHT OF FIRST SELECTION RESPONSE ITEMS

The Right of First Selection Response Items contains a complete list of topics which must be covered in a W-2 Plan. The Right of First Selection W-2 agency's Plan to administer W-2 and Related Programs ("RFS W-2 Plan"), for 2002-2003, must contain a response to all of the topics except those identified as not applicable to the RFS W-2 Plan. The wording 'not applicable to RFS W-2 Plan' is in a parenthesis next to each topic that is not applicable to a RFS W-2 Plan.

Each topic that will require a response, whether the required response is new, updated, or an incorporation of the current response, will be comprised of the following components:

Summary:

This is a summary of the program or a brief description of the requirements. Some topics do not have a summary, such as the W-2 Agency Identification Form, and the Organization Structure. Policies provide more detailed information about requirements. The Listing of the Department's Policies and Procedures can be found at <http://www.dwd.state.wi.us/des/w2contract02/rfs/default.htm>.

Response Items:

This section lists all of the items to which the RFS W-2 agency must develop a new or updated response. The response information is required to assess the quality of the W-2 agency's services. The 2002-2003 RFS W-2 Plan responses may include information that is in the current W-2 Plan if those responses remain current and addresses all of the response items listed in this document. **Where applicable, the W-2 agency must clearly differentiate the W-2 agency's past and current Plan from the W-2 agency's Plan for the future, for example for the 2002-2003 W-2 and Related Programs Contract.**

Topics without a summary or response item(s) may require new or updated responses. The need for a new or updated response is dependent upon how up-to-date the current W-2 Plan is and Plan changes, if any, proposed by the W-2 agency.

INSTRUCTIONS FOR 2002-2003 RFS W-2 PLAN

Topics Not Applicable to RFS W-2 Plans

All topics that are not applicable to RFS W-2 Plans are identified as such in this document in the specific topic heading. The W-2 Agency Reference Form is an example of a topic that is not applicable to an RFS W-2 Plan. This topic is applicable to a W-2 agency that is awarded a contract through the competitive Requests for Proposals ("RFP") process. Do not include items from the current W-2 Plan that are not applicable to the 2002-2003 RFS W-2 Plan.

Topics with a Response Item(s)

Topics with a response item(s) require new or updated responses for the RFS re-contracting process. The W-2 agency must take the following steps:

1. Provide a response to all of the items listed in the section. Some of the items which require a response were covered in a previous W-2 Plan, however, some or all of the response items have been changed to provide information on an area of emphasis. (A comparison of the response items in the 2000-2001 Request for Proposal (RFP) to Administer Wisconsin Works (W-2) and Related Programs and the response items in this document will provide specific details on the response items that have been changed.) The RFS W-2 Plan must provide a response to all of the new or revised response items.
2. Incorporate the response into the main body of the RFS W-2 Plan for that topic.

Topics without a Response Item(s)

- A. If the W-2 agency's W-2 Plan is up-to-date and no change is proposed, incorporate the current response into the RFS W-2 Plan.
- B. If the W-2 agency's current W-2 Plan (for 2000-2001) is not up-to-date, the RFS W-2 agency must take the following steps to update the current W-2 Plan:

1. Review the W-2 agency's approved W-2 Plan and approved modifications for each of these topics. For each topic in the approved W-2 Plan that was modified by a Plan Modification approved by the Department's Contract Manager, incorporate the approved modification(s) into the main body of the RFS W-2 Plan for that topic.
 2. Determine if the W-2 Plan on each topic is up-to-date. If any topic is not up-to-date, provide an updated response which covers all of the response items listed in the 2000-2001 Request for Proposal (RFP) to Administer Wisconsin Works (W-2) and Related Programs for that topic, for approval as part of this RFS W-2 Plan Re-contracting process. Clearly identify the proposed effective date for each proposed change.
- C. If the W-2 agency's W-2 Plan is up-to-date, however, the W-2 agency proposes to make changes for the 2002-2003 W-2 and Related Programs Contract, the RFS W-2 agency must take the following steps:

For each topic identified for proposed changes for the 2002-2003 Contract, provide the proposed change for each topic for approval as part of this RFS W-2 Plan Re-contracting process. Be certain that the new response covers all of the response items listed in the 2000-2001 Request for Proposal (RFP) to Administer Wisconsin Works (W-2) and Related Programs. Clearly identify the proposed effective date for each proposed change.

Deleted Topics

The attached reference chart provides detailed information for comparing the numbering changes from section 7 of the 2000-2001 W-2 and Related Programs RFP and the 2002-2003 Right of First Selection Response Items.

The following list provides information on deleted topics.

- Financial Statements (7.1.12) was deleted and replaced with a new topic titled Financial Management (7.1.7).
- Medicaid/BadgerCare (7.2.9.1) and the Food Stamp Program (7.2.4) topics were deleted due to the changed requirements for Medicaid and food stamps for the W-2 agency in the 2002-2003 contract period. A new topic, Food Stamps and Medicaid (7.2.9.1) was created to address the revised responsibilities for these programs.
- Quality Control (7.2.10.1) was deleted and replaced with Quality Assurance/Improvement (7.2.10.1).
- Contract Pricing and Payment – General Provision (7.4.1), Caseload Assumptions (7.4.2), and Contract Funding Caps (7.4.3) were deleted.

Summary:

Each RFS W-2 agency must provide a complete updated RFS W-2 Plan for the 2002-2003 W-2 Contract that addresses all of the topics listed in the Right of First Selection Response Items, except those not applicable to a RFS W-2 Plan, by reviewing and updating (if needed) its current W-2 Plan and responding to the areas of emphasis and new topics in the attached Right of First Selection Response Items.

The 2002-2003 RFS W-2 Plan must be complete without referring to another document (such as referring to the 2000-2001 W-2 Plan).

RFS Response Item Number	Numbering in the 2002-03 Version	Numbering in the 2000-01 Version	Changed Item
7.1	Program Identification/Organization	Same	None
7.1.1	W-2 Agency Identification Form	Proposer Agency Identification Form	Proposer replaced with W-2 Agency and revised form.
7.1.2	W-2 Agency References Form (Not applicable for RFS agency Plan)	Proposer Agency References Form	Only for non-RFS agencies
7.1.3	Executive Summary	Affidavit Form	The Affidavit Form is Attachment C (7.1.9)
7.1.4	Organizational Structure	Designation of Confidential and Proprietary Information Form	The Designation of Confidential and Proprietary Information Form is Attachment D (7.1.10) – however, not applied to RFS agency Plan.
7.1.5	Subcontracts	Certification Regarding Debarment, Suspension, Ineligibility And Voluntary Exclusion Lower Tier Covered Transactions Form	The Debarment Form is Attachment E (7.1.11)
7.1.6	Job Service	Lobbying Forms	The Lobbying Forms are Attachments F-1 and F-2 (7.1.12)
7.1.7	Financial Management	Executive Summary	Executive Summary is now 7.1.3
7.1.8	Insurance	Agency Capabilities in Managing Programs/Providing Services	Agency Capabilities in Managing Programs/Providing Services moved to 7.2.1
7.1.9	Affidavit Form	Organizational Structure	Organizational Structure is now 7.1.4
7.1.10	Designation of Confidential and Proprietary Information Form (Not applicable for RFS agency Plan)	Subcontracts	Subcontracts is now 7.1.5
7.1.11	Certification Regarding Debarment Form	Job Service	Job Service is now 7.1.6
7.1.12	Lobbying Forms	Financial Statements	Financial Statements is now Financial Management
7.1.13	ParticipantsTime Limits Confidentiality Acknowledgement Form (Not applicable to RFS Plan)	Insurance	Insurance is now 7.1.8
7.2	Program Plan	Same	Same
7.2.1	Agency Capabilities in Managing Programs/Providing Services	Staffing, Staff Qualifications and Staff Training	Staffing, Staff Qualifications and Staff Training moved to 7.2.2
7.2.2	Staffing, Staff Qualifications and Staff Training	Information System Technical Requirements	Information System Technical Requirements moved to 7.2.3
7.2.3	Information System Technical Requirements	Participant Flow	Participant Flow moved to 7.2.4
7.2.4	Participant Flow	Food Stamp Program	Food Stamp Program deleted
7.2.5	Participant Employment Services	Participant Employment Services	Same

RFS Response Item Number	Numbering in the 2002-03 Version	Numbering in the 2000-01 Version	Changed Item
7.2.5.1	W-2 Employment Position Development	W-2 Employment Position Development	Same
7.2.5.2	W-2 Participant Placement in W-2 Positions	W-2 Participant Placement in W-2 Positions	Same
7.2.5.3	Employer Services	Training for Employers	Topic renamed
7.2.5.4	Financial and Employment Planning and Case Management	Financial Employment Planning and Case Management	And inserted into topic title for 2002-03
7.2.5.5	Serving a Population with Serious and Multiple Barriers to Employment	Serving a Population with Serious and Multiple Barriers to Employment	Same
7.2.6	Food Stamp and Employment Training	Food Stamp and Employment Training	Same
7.2.7	Job Retention and Advancement	Job Retention and Advancement	Same
7.2.8	Education and Training Services	Education and Training Services	Same
7.2.9	Support and Other Services	Support and Other Services	Same
7.2.9.1	Food Stamps and Medicaid	Medicaid/BadgerCare	Deleted Medicaid/BadgerCare due to changed requirements in 2002-03 for FS and MA
7.2.9.2	Child Care	Child Care	Same
7.2.9.3	Transportation	Transportation	Same
7.2.9.4	Workforce Attachment and Advancement	Employment Skills Advancement Program	Employment Skills Advancement Program moved to 7.2.9.5
7.2.9.5	Employment Skills Advancement Program	Job Access Loans	Job Access Loans moved to 7.2.9.6
7.2.9.6	Job Access Loans	Learnfare	Learnfare moved to 7.2.9.7
7.2.9.7	Learnfare	Refugee Cash Assistance and Refugee Medicaid	Refugee Cash Assistance and Refugee Medicaid moved to 7.2.9.8
7.2.9.8	Refugee Cash Assistance and Refugee Medicaid	Emergency Assistance	Emergency Assistance moved to 7.2.9.14
7.2.9.9	Emergency Payments	Emergency Payments	Same
7.2.9.10	Earned Income Credit	Earned Income Credit	Same
7.2.9.11	Minor Parents Services	Minor Parent Services	Same
7.2.9.12	Non-custodial Parent Services	Non-custodial Parent Services	Same
7.2.9.13	Child Support	Child Support	Same
7.2.9.14	Emergency Assistance	No 7.2.9.14	
7.2.9.15	Supportive Service Plan	No 7.2.9.15	
7.2.10	Administrative Functions Summary	Administrative Functions Summary	Same
7.2.10.1	Quality Assurance/Improvement	Quality Control	Quality Control deleted and replaced with this new topic
7.2.10.2	Corrective Action Plan Implementation	Dispute Resolution and Fact Finding	Dispute Resolution and Fact Finding moved to 7.2.10.3

RFS Response Item Number	Numbering in the 2002-03 Version	Numbering in the 2000-01 Version	Changed Item
7.2.10.3	Dispute Resolution and Fact Finding	Benefit Overpayment Recovery	Benefit Overpayment Recovery moved to 7.2.10.4
7.2.10.4	Benefit Overpayment Recovery	Public Assistance Fraud	Public Assistance Fraud moved to 7.2.10.5
7.2.10.5	Public Assistance Fraud	None	
7.2.11	Transition Responsibilities of a New W-2 Agency (Not applicable for RFS agency Plan)	Transition Responsibilities of a New W-2 Agency	Same
7.2.12	None	Year 2000 Compliance	Deleted Year 2000 Compliance
7.3	Coordination and Collaboration	Coordination and Collaboration	Same
7.3.1	General Coordination and Collaboration	General Coordination and Collaboration	Same
7.3.2	Community Steering Committee	Community Steering Committee	Same
7.3.3	Children's Services Network	Children's Services Network	Same
7.4	Cost Proposal (Not applicable to RFS agency Plan)	Cost Proposal	Same
7.4.1	None	Contract Pricing and Payment – General Provisions	Deleted
7.4.2	None	Caseload Assumptions	Deleted
7.4.3	None	Contract Funding Caps	Deleted
	Attachment A - W-2 Agency Identification Form (Required)	Attachment 8.1 Proposer Agency Identification Form	Revised form and title
	Attachment B – Proposer Agency References Form (Not applicable to RFS agency Plan)	Attachment 8.2 Proposer Agency References Form	Revised title not applicable to RFS agency Plan
	Attachment C – Affidavit Form (Required)	Attachment 8.3 Affidavit Form	Revised title not applicable to RFS agency Plan
	Attachment D – Designation of Confidential and Proprietary Information Form (Optional) (Not applicable to RFS agency Plan)	Attachment 8.4 Designation of Confidential and Proprietary Information Form	Revised title not applicable to RFS agency Plan
	Attachment E – Debarment Form (Required)	Attachment 8.5 Debarment Form	Revised title
	Attachment F-1 – Lobbying Forms (Required)	Attachment 8.6 Lobbying Form	Revised title
	Attachment F-2 – Disclosure of Lobbying Activities Form (Required for a W-2 agency that has lobbying activities.)	Attachment 8.6.2 Lobbying Form	Revised title
	Attachment G – Participants Time Limits Confidentiality Acknowledgement Form (Optional)	Attachment 8.8 Participants Time Limits Confidentiality Acknowledgement Form	Revised title
	Attachment H – Cost Proposal Form (Not applicable to RFS agency Plan)	Attachment 8.7 Cost Proposal Form	Revised title not applicable to RFS agency Plan

7.1 Program Identification/Organization

7.1.1 W-2 Agency Identification Form

Response Item:

Complete the W-2 Agency Identification Form, Attachment A to the Right of First Selection Response Items.

7.1.2 W-2 Agency References Form (Not applicable to RFS agency Plan)

7.1.3 Executive Summary

7.1.4 Organizational Structure

Response Item:

Provide an organizational chart including any proposed (or actual when known) subcontractor(s).

7.1.5 Subcontracts

7.1.6 Job Service

7.1.7 Financial Management

Summary:

The W-2 agency is required to comply with all federal and state financial rules and regulations to assure that state and federal funds are used appropriately and effectively to provide services to eligible persons as required by the W-2 Contract. The W-2 agency is required to provide effective financial management that includes establishing and implementing appropriate checks and balances within the organization to prevent misuse of the state and federal funds as a result of errors, bad judgment and fraud.

Response Items:

Describe your agency's financial management system. Include the following in your response:

- a) A description of all agency and contracted positions responsible for approval of financial transactions and their scope of authority;
- b) How agency staff are trained on allowable cost policies, including how to determine that a cost is appropriate within the W-2 Contract;
- c) Your agency's requirements for documentation of expenses, their purpose and allowability that demonstrate that expenses charged to the W-2 contract are reasonable and necessary, appropriately allocated, and meet all other federal and state requirements;
- d) The oversight process your agency uses to assure that financial requirements are met; and
- e) Your agency's procurement requirements as they relate to the provision of services under the W-2 Contract, in particular how your agency assures open and competitive procurement.

7.1.8 Insurance

Summary:

In addition to the Insurance Responsibility section of the Contract Terms (section 6.37), the W-2 agency will be responsible for ensuring the following:

- a) Participants in Trial Jobs, CSJs and W-2 T positions are covered by worker's compensation insurance and other insurance deemed necessary by the W-2 agency (Worker's compensation insurance for Trial Jobs is the responsibility of the employer.);
- b) Participants in FSET positions are covered by workers' compensation insurance and other insurance deemed necessary by the W-2 agency;
- c) Those repaying job access loans through volunteer work or gaining work experience through volunteer work (for example, non-custodial parents participating in unpaid job placements) are covered by whatever type of insurance is deemed necessary by the W-2 agency; and

d) Its subcontractors, if any, carry necessary insurance coverages.

Response Item:

Describe your agency's plan for insurance, including how your agency will ensure your agency, employers, and any subcontractors carry sufficient and appropriate insurance. (Do not submit insurance certificates.)

7.1.9 Affidavit Form

Response Item:

Complete the Affidavit form, Attachment C to the Right of First Selection Response Items.

7.1.10 Designation of Confidential and Proprietary Information Form (Not applicable to RFS agency Plan)

7.1.11 Certification Regarding Debarment Form

Summary:

The W-2 agency certifies that neither the W-2 agency nor any of its principals are debarred, suspended, or proposed for debarment from federal financial assistance (e.g., General Services Administration's List of Parties Excluded from Federal Procurement and Non-Standard Programs). The W-2 agency will obtain certifications from subcontractors stating that neither the subcontractors nor potential sub-recipients, contractors, or any of their principals are debarred, suspended or proposed for debarment.

Response Item:

Complete the Debarment Form, Attachment E to the Right of First Selection Response Items.

7.1.12 Lobbying Forms

Summary:

The W-2 agency must in all cases sign the Certification Regarding Lobbying (Attachment F-1 to the Right of First Selection Response Items) to certify that it has complied with federal law by not using federal funds to lobby any federal or state employee or legislator in connection with the award of the W-2 Contract.

The W-2 agency must complete the Disclosure of Lobbying Activities (Attachment F-2 to the Right of First Selection Response Items) to disclose any funds other than federal funds that have been used for such lobbying with a contract or subcontract award. This form only needs to be completed if there is lobbying in connection with a contract or subcontract.

The Lobbying Certification section does not apply to an American Indian tribe with respect to expenditures permitted by other federal laws.

Response Item:

Complete the Lobbying form, Attachment F-1 to the Right of First Selection Response Items, and if applicable, complete Attachment F-2 to the Right of First Selection Response Items.

7.1.13 Participants Time Limits Confidentiality Acknowledgement Form (Optional/Not Applicable to RFS agency Plan)

7.2 Program Plan

7.2.1 Agency Capabilities in Managing Programs/Providing Services

7.2.2 Staffing, Staff Qualifications and Staff Training

Summary:

The W-2 agency must employ staff in accordance with the Department's Policies and Procedures for worker to caseload ratio.

The W-2 agency must ensure all staff, including subcontracted staff, complete prescribed Departmental training.

Response Items:

Describe your agency's plan for staffing, staff qualifications and staff training. Include the following in your response:

- a) How your agency will effectively manage the workload when vacancies occur;
- b) An organizational chart detailing staff;
- c) Minimum qualifications and position descriptions for each classification of staff including persons responsible for the transferring of caseloads and those with the responsibility for installation and maintenance of IT equipment and software;
- d) If the W-2 agency's service population includes a significant number of Limited English Proficient residents, how staff and/or subcontractors will meet the language needs of this population;
- e) Types of training your agency will provide staff, including cross training in other Job Center programs;
- f) How you will provide training to staff if the Department-prescribed training is not offered timely;
- g) How your agency will ensure a FEP will not have a caseload until the appropriate minimum training has been completed; and
- h) Your agency's plan to comply with the caseload size requirements.

7.2.3 Information System Technical Requirements**Summary:**

The W-2 agency must establish the means to access and utilize W-2 related information systems. The W-2 agency's information technology (IT) infrastructure must support all W-2 requirements. W-2 IT technical specifications and requirements are detailed at <http://www.dwd.state.wi.us/w2tech>.

Note: Technical specifications are subject to change over time. If a W-2 agency has questions about technical specifications at any time during the Contract period they must contact the Department's Contract Manager to find out where updated W-2 IT technical specifications are located. If a W-2 agency decides to make any significant changes to its IT environment during the Contract period they must contact the Department's Contract Manager to find out what procedures to follow.

Response Items:

New W-2 agencies must provide an IT plan as described below.

Current W-2 agencies who are expanding to new locations must provide an IT plan as described below for their new locations. Current W-2 agencies who have no new locations but who are planning significant changes to their IT environment must provide a summary of the planned changes. Examples of significant changes are moving a firewall or changing a gateway operating system. Current W-2 agencies that are making no significant IT changes must provide a statement saying that no significant IT changes are planned.

IT plan

A signed data sharing agreement between the Department and the W-2 agency is required before access to the Department's automated systems will be granted. The DES Data Steward will facilitate preparation of the agreement and obtaining the necessary signatures.

Cover the following areas in your IT plan:

- a) Explain how your agency will meet all standards established by the Department for the reporting of data, activities, outcomes and other specific information in the Department's automated systems. These standards include but are not limited to the timeliness of data entry, the accuracy of data entered and time limits for specific types of data;

- b) Explain how your agency will monitor CARES and KIDS access by staff to ensure that the information is used only for W-2 program administration purposes. Explain how Security Manual policies and procedures regarding confidentiality and the use of individual logon IDs are followed; and
- c) Provide a detailed description of the computer environment that will be used to support the delivery of W-2 services. Include the following:
 - 1) A statement of the Department's connectivity model to be used;
 - 2) A network diagram showing the configuration of the workstations, servers, gateways, firewalls, connections to the State or other organizations, and any other significant network components;
 - 3) A listing of your network hardware and software. Provide product names, models/versions, and quantities;
 - 4) A listing of your desktop hardware (including printers and other peripherals) and desktop software. Provide product names, models/versions, and quantities. Indicate how many computers you currently have and how many computers you plan to acquire;
 - 5) A workplan and schedule for implementing and testing your IT infrastructure;
 - 6) A plan for providing on-site technical assistance and support for staff; and
 - 7) A description of the disaster recovery back-up plans, procedures, and systems to ensure continuance of operation.

7.2.4 Participant Flow

7.2.5 Participant Employment Services

Summary:

The W-2 agency must work with employers in the community, Community Steering Committee, and Job Center partners to access unsubsidized jobs and to create Trial Jobs, Community Service Jobs, and W-2 Transition opportunities.

7.2.5.1 W-2 Employment Position Development

7.2.5.2 W-2 Participant Placement in W-2 Positions

Summary:

The primary role of the FEP is to assess individuals and determine appropriate placement in one of the W-2 employment positions on the W-2 ladder (also called tier) (Unsubsidized Employment, Trial Job, Community Service Job and W-2 Transition). Placing applicants and participants in the most appropriate employment position requires, at a minimum, an informal assessment. An informal assessment is defined as "a process to determine the appropriate placement of a participant on the W-2 employment ladder. This determination must take into consideration recent job search efforts, work history, education, job skills and other factors that will affect employment," which may also include interests and abilities.

Response Items:

Describe in detail your agency's plan for assessing W-2 applicants and participants to ensure appropriate placement in one of the W-2 employment positions (i.e., Unsubsidized Employment, Trial Job, Community Service Job and W-2 Transition). Include the following in your response:

- a) The process your agency will take to assess W-2 applicants in order to determine appropriate W-2 placement;
- b) The process your agency will take to assess W-2 participants on an ongoing basis to ensure appropriate W-2 employment position placement;
- c) The process your agency will take to ensure assessment prior to moving a participant from one W-2 employment position to another W-2 employment position;

- d) The process your agency will take to ensure adequate assessment documentation in CARES; and
- e) Any current efforts that support your agency's success in moving low-income individuals to unsubsidized jobs and self-sufficiency. If subcontracting for this function, the steps that will be taken to include the subcontractor in the transitioning of the W-2 participants to unsubsidized employment.

7.2.5.3 Employer Services

Response Items:

Describe your agency's plan for outreach to employers, including the specific industries or occupations that your agency will target.

Describe your agency's plan for training employers. Include the following in your response:

- a) How your agency will plan employer training programs to assist them in transitioning W-2 participants into jobs; and
- b) How your agency will plan employer training programs to assist them in developing effective management techniques to help W-2 participants retain their jobs, obtain support services, and participate in career development programs.

7.2.5.4 Financial Employment and Case Management

7.2.5.5 Serving a Population with Serious and Multiple Barriers to Employment

Summary:

In light of the success W-2 has achieved in terms of caseload decline, families who remain on the W-2 caseload for a significant amount of time are a population the majority of whom have serious and multiple barriers to employment. For these individuals, an in-depth formal assessment may need to be completed in consultation with a qualified assessing agency.

Participants who face these multiple and serious barriers are also more likely to be long term participants. Working with a population with multiple barriers to employment necessitates strong coordination and collaboration with other organizations and agencies.

Response Items:

Describe your agency's plan for serving a population with serious and multiple barriers to employment. Include the following in your response:

- a) How your agency will serve applicants or participants whose barriers require special screening and assessment, such as applicants/participants who lack basic skills in math and reading; lack a high school diploma; come from a violent family situation; have serious alcohol and other drug abuse (AODA) histories or issues; have mental, physical and other health issues; have a learning disability; face family issues, such as parenting a child with special needs; and/or have limited or no English proficiency. Include the following in your response:
 - 1) The process your agency will employ to ensure that barriers are identified (e.g. screening tools, other strategies) and participants are appropriately referred for formal assessments;
 - 2) The process your agency will take to ensure that the assessing agency is qualified and demonstrates evidence of the following, including but not limited to:
 - Persons providing assessment services demonstrate competency or successful completion of training in the appropriate field;
 - Certification by an appropriate accreditation organization, e.g. the Rehabilitation Accreditation Commission, Commission on Certification of Work Adjustment and Vocational Evaluation Specialists;

- Persons providing assessment services demonstrate an understanding of the objectives of the assessment based on referral information, referral questions, the initial interview, and the stated purpose of the evaluation;
 - Assurance that an individualized written evaluation plan will be provided that can be used by the FEP to adapt W-2 activities to accommodate the needs of the participant; and
 - Assurance of an employment or work-related focus (or, if an employment focus is not a part of the assessing agency's services, assurance that your agency will seek further vocational assessments beyond the qualified assessing agency's services);
- 3) The process your agency will take to ensure that the results of a formal assessment are used to determine appropriate W-2 placement, activities and necessary work-related accommodations. (A formal assessment is an assessment completed by the Division of Vocational Rehabilitation or a similar qualified assessing agency or business.);
 - 4) How your agency's case management procedures will differ for these participants to accommodate the special needs of this population which mandates a more intensive approach to case management; and
 - 5) How your agency will ensure that these participants are engaged in appropriate activities that directly address their issues and barriers and the internal guidelines you will use to monitor engagement in these activities;
- b) The process your agency will implement to ensure that SSPs and FEPs are adequately trained and otherwise equipped to effectively work with participants who have multiple and/or serious barriers to employment;
 - c) Your agency's approach in working with the population facing time limits, including:
 - 1) The special strategies your agency will employ to assist participants who are nearing:
 - their twenty-four (24) month time limit on a W-2T or CSJ placement, and/or
 - their sixty (60) month time limit on TANF assistance.

(A W-2 agency awarded a contract for the 2002-2003 contract term will have caseloads comprised of a number of families that may be close to reaching their time limits for receipt of cash assistance.);
 - 2) The tools your agency will use to concentrate efforts for families who are seeking or who have been granted extensions to their twenty-four (24) or sixty (60) month time limits;
 - 3) The special actions your agency will take to ensure that participants are aware of time limits and kept informed of their time limit status (for example, special motivational sessions on time limits, training and brochures); and
 - 4) The actions your agency will take to provide service for individuals who have exhausted their time limits;
 - d) The approach your agency will take toward fostering working relationships with other agencies and organizations in your region in order to serve a population facing multiple barriers to employment; and
 - e) Strategies to make all language communication accessible, including use of bilingual staff, notices of language assistance, and accessible notices.

7.2.6 Food Stamp and Employment Training

Summary:

The W-2 agency must operate the Food Stamp Employment and Training (FSET) program. The W-2 agencies must provide services that will allow Able-Bodied Adults Without Dependents (ABAWD) and non-ABAWD FSET participants to meet all federal and State requirements for maintaining their eligibility for food stamps.

Response Items:

Describe your agency's plan for the Food Stamp Employment and Training program. Include the following in your response:

- a) How the Food Stamp Employment and Training program and the W-2 program will interface with each other;
- b) How the W-2 agency will coordinate the CARES referral and disenrollment processes with the Food Stamp agency;
- c) The process for enrolling and engaging participants in the required and appropriate FSET components/statuses, and monitoring to ensure full engagement of each participant under the Department's program policies;
- d) The process for requesting, determining and imposing FSET sanctions and ABAWD strikes, and monitoring of the process between the W-2 agency and the Food Stamp agency;
- e) The process for identifying FSET participants who do not have a high school diploma or its equivalency and engaging those individuals in the basic education components;
- f) The program services your agency plans to provide to FSET participants; and
- g) What monitoring or tracking will be done to ensure that all ABAWDs are being enrolled, served and correctly reported in CARES and CARS.

7.2.7 Job Retention and Advancement**Summary:**

The W-2 agency's efforts to help participants retain and advance in employment are critical to ensuring participants achieve long term self-sufficiency and are consistent with the direction of the W-2 program. W-2 agencies must provide Case Management Follow-Through services for a minimum of six (6) months to persons leaving employment positions for unsubsidized employment.

Response Items:

Describe your agency's plan for job retention and advancement. Include the following in your response:

- a) Your agency's plan to provide Case Management Follow-Through (CMF) services to recent W-2 "graduates" for the minimally required six (6) month period (or if longer, for how long) and to follow-up on participants leaving FSET for unsubsidized employment;
- b) A description of the services your agency will provide to participants in the CMF category, such as education, training, and support services, and how frequently they will be provided; and
- c) How your agency will coordinate job retention and advancement services provided out of the base W-2 contract with other available programs, such as Welfare-to-Work (WtW), Workforce Attachment and Advancement (WAA), Children First, and Community Reinvestment. Describe how your agency will assist CMF participants in transitioning to these programs.

7.2.8 Education and Training Services**7.2.9 Support And Other Services****7.2.9.1 Food Stamps and Medicaid****Summary:**

W-2 agencies are responsible for collaborating with Income Maintenance (IM) agencies to ensure program access and timely delivery of services to Food Stamp and Medicaid applicants and customers.

Response Items:

Describe your agency's plan for coordination and collaboration with the IM agency and how your agency will provide information about Food Stamps and Medicaid to applicants and customers. Include the following in your response:

- 1) How will the W-2 agency facilitate physical access for applicants and customers to staff from the IM agency for the purpose of Food Stamp and Medicaid eligibility determination (e.g., co-location);
- 2) How will the W-2 agency assure provision of information/applications for Food Stamps and Medicaid to applicants and customers in need of food and/or health care assistance; and
- 3) How will the W-2 agency and the IM agency provide services, including scheduling of appointments recognizing that some applicants and customers will need services from both agencies.

7.2.9.2 Child Care**7.2.9.3 Transportation****7.2.9.4 Workforce Attachment and Advancement****Summary:**

Implementation of the Workforce Attachment and Advancement program is a joint W-2 agency and Workforce Development Board responsibility. A joint planning process, separate from this process, will be conducted prior to January 1, 2002.

Response Items:

Describe your agency's plan for implementation of WAA. Include the following in your response:

- a) How your agency will coordinate with the Workforce Development Board on the joint planning process;
- b) Regardless of whether the W-2 agency or the WDB manages the WAA activities in your geographic area, how your agency will assure seamless and coordinated services to W-2 participants as they increase earnings; and
- c) How your agency will consult with local partners, such as child support agencies and Division of Vocational Rehabilitation (DVR) agencies, during program planning and implementation.

7.2.9.5 Employment Skills Advancement Program**7.2.9.6 Job Access Loans****Summary:**

Job Access Loans (JALs) are designed to meet basic expenses of participants related to obtaining or maintaining employment and must be repaid either in cash or through a combination of cash and in-kind activities. The W-2 agency must keep CARS and CARES current in the same expense period as the loan is issued or repayment is collected.

Response Items:

Describe your agency's plan for Job Access Loans (JALs). Include the following in your response:

- a) How your agency will determine eligibility and need for JALs, including issuance of emergency loans within twenty-four (24) to ninety-six (96) hours of loan approval;
- b) Procedures your agency will use to pursue the repayment in full within the repayment period, including the method for monitoring volunteer service hours which may be used as a repayment method;

- c) How your agency will monitor its JAL collection rate (amount collected as compared to amount loaned), for individual loans and total JAL amounts;
- d) How your agency's use of JALs will help people obtain/maintain employment; and
- e) If you are a currently contracted W-2 agency that has not issued JAL loans, what barriers prevent you from doing so.

7.2.9.7 Learnfare

7.2.9.8 Refugee Cash Assistance and Refugee Medicaid

7.2.9.9 Emergency Payments

Summary:

This is a program that a W-2 agency must establish to assist a participant in a W-2 T, CSJ, Trial Job, or Custodial Parent of an Infant placement who is experiencing extreme hardship while awaiting a first payment.

Response Items:

Describe your agency's plan for Emergency Payments. Include the following in your response:

Your agency's plan to implement a program for newly placed participants who are experiencing an extreme financial hardship.

7.2.9.10 Earned Income Credit

7.2.9.11 Minor Parents Services

7.2.9.12 Non-custodial Parent Services

7.2.9.13 Child Support

7.2.9.14 Emergency Assistance

Summary:

The W-2 agency will be responsible for administering the Emergency Assistance program to eligible needy families.

Response Item:

Describe your agency's plan for Emergency Assistance. Include the following in your response:

Your agency's plan to administer the Emergency Assistance services to eligible needy families, including who will determine eligibility and how assistance will be provided in a timely manner.

7.2.9.15 Supportive Service Plan

Summary:

W-2 agencies must ensure that participants who are leaving a W-2 payment placement, in a case management placement or are diverted from W-2 participation are offered assistance in developing a supportive service plan. The goal of a supportive service plan is to proactively help individuals address family and work-related needs. The supportive service plan must include information and assistance in connecting with supportive services available within the agency as well as other resources that are a part of the agency's Children's Services Network. The plan also must include strategies for addressing family and work emergencies before these situations result in family crisis and loss of employment.

Response Items:

Describe your agency's plan to develop supportive service plans with participants who are leaving a W-2 payment placement, in a case management placement, or are diverted from W-2 participation.

7.2.10 Administrative Functions

7.2.10.1 Quality Assurance/Improvement

Summary:

The W-2 agency shall operate an internal quality assurance system designed to prevent, detect and correct errors related to eligibility determination, to regularly assess the quality of services provided, and to systematically identify and implement improvements.

W-2 agencies must periodically obtain feedback from applicants and participants about their level of satisfaction with services of the W-2 agency, to identify barriers to provision of quality services, and to improve service delivery. Agencies may use a variety of tools to assess their customer service delivery system. Results must be shared with the Department.

In addition, the State will survey applicants and participants periodically. The completed surveys will be distributed, collected and analyzed by the state or a contracted vendor.

Response Items:

Describe your agency's plan for Quality Assurance/Improvement. Include the following in your response:

- a) A description of the internal process your agency will use to track agency performance in the timeliness of data entry and the accuracy of data entered in CARES;
- b) How your agency will periodically assess if workers are taking appropriate actions in the management of their cases, including but not limited to, whether applicants and prospective applicants are being offered the full range of services available to meet their needs;
- c) How your agency will obtain feedback from applicants and participants, including but not limited to, timeliness in returning phone calls and responding to requests for appointments, overall courtesy displayed by workers toward participants;
- d) A description of the process your agency will follow in the event that the internal quality assurance system shows that improvement is needed in certain areas, or the need for corrective action is identified by the Department; and
- e) How your agency will use information from consumer feedback, DWD monitoring, complaints, Fact Finding process, audits and other sources to assess agency performance and make improvements.

7.2.10.2 Corrective Action Plan Implementation

Summary:

Any W-2 agency that is or has been under a Corrective Action Plan at any time between January 1, 2000 and June 4, 2001 (due date for RFS W-2 Plans), must respond as a part of their RFS W-2 Plan, to specific questions from the Department. These questions will relate specifically to the corrective actions required of the agency and will be provided to the applicable W-2 agency. The W-2 agency will have four (4) weeks to submit its response.

7.2.10.3 Dispute Resolution and Fact Finding

Summary:

The agency shall establish the appropriate dispute resolution process for applicants or participants to request a review of the W-2 agency's actions, either Fact Finding or Fair Hearing, as prescribed by the administrative rules. Notice of Appeal rights will be discussed with applicants and participants at the time of application. For every negative action, denial, or sanction, a notice is automatically generated by the CARES system, again explaining the applicant's and participant's right to appeal.

Individuals who believe that an agency decision regarding any component of W-2 (e.g., employment positions, Job Access Loans, Child Care, Learnfare, Emergency Assistance)

is incorrect, may request a Fact Finding Review by the W-2 agency within forty-five (45) calendar days of the agency's decision. W-2 payments shall not be continued pending the Fact Finding Decision, with the exception of requests for a Fact Finding Review within ten (10) calendar days of the notice due to a Learnfare penalty.

Response Items:

Describe your agency's plan for dispute resolutions and Fact Finding. Include the following in your response:

- a) Your dispute resolution and Fact Finding processes, including but not limited to your internal procedures for accepting a fact finding request so that it ensures:
 - 1) an easy, workable method of request for applicants and participants; and
 - 2) that applicants and participants understand the deadline for submitting fact finding requests.
- b) How your agency will advise W-2 participants of their right to appeal denial or termination decisions; and
- c) The Fact Finder's independence and knowledge of their programs.

7.2.10.4 Benefit Overpayment Recovery

7.2.10.5 Public Assistance Fraud

7.2.11 Transition Responsibilities of a New W-2 Agency (not applicable to RFS)

7.3 Coordination and Collaboration

7.3.1 General Coordination and Collaboration

Summary:

The W-2 agency must establish and maintain effective relationships with community service providers and other partners in a way that avoids duplication of services. Unless a W-2 agency presents the Department with a compelling justification for doing otherwise, the W-2 agency must integrate W-2 services into the Job Center system and collocate W-2 services and staff either at the Job Center site or at a combination of Job Center and Affiliated Service sites.

Response Items:

Describe your agency's plan for coordination and collaboration. Include the following in your response:

- a) Your agency's approach to establishing and maintaining effective working relationships with all partners and providers in your community;
- b) Your agency's working relationship with Child Protective Services;
- c) If your agency is not the agency performing Child Care Administrative task include how your agency will coordinate with that government entity to facilitate child care authorizations;
- d) How coordination agreements and their performance will be monitored and periodically evaluated by your agency;
- e) The efforts your agency will take in orienting partners and providers as to the services your agency will provide and the general nature of the W-2 program, including the role the Community Steering Committee will take in this process;
- f) Any past experiences your agency has encountered where coordination was difficult and what steps you took to overcome these situations;
- g) The strategies your agency will employ to coordinate services relating to programs such as Community Reinvestment, Welfare-to-Work, the TANF Employment Transportation Grant, and other service programs that may be under the purview of non-W-2 agencies (Coordination with other agencies and partners also lends itself to coordinating W-2 services with services other agencies may be providing to the participant.);

- h) The procedures your agency will use to coordinate the delivery of services to individuals who receive services from more than one program and how program participant information will be exchanged with the other partner agencies serving these individuals;
- i) How your agency will deliver W-2 and related programs through the Job Center service delivery system. If your agency will not deliver W-2 and the related programs in a Job Center facility, explain why;
- j) Your agency's current and proposed coordination efforts and relationship with the Job Center and other partner agencies. Indicate whether your agency has an agreement with other partner agencies on how services will be provided through the Job Center. Include how your agency will participate in Job Center staff teams in areas such as employer relations, management of the Job Center, and on the Workforce Development Board. Include how your agency will provide access to a copy of the W-2 Plan for the Workforce Development Board and others interested in the W-2 Plan;
- k) A description of the model of Job Center operation that will be used at the time of contract implementation and planned changes over the duration of the Contract; and
- l) The methodology your agency will employ to ensure a smooth transition for participants who are transferring to your agency from another W-2 agency, including how CARES will be used in this process.

7.3.2 Community Steering Committee

7.3.3 Children's Services Network

7.4 Cost Proposal (Not applicable to RFS agency Plan)

ATTACHMENT A

To the Right of First Selection Response Items

W-2 Agency Identification Form (Required) 2002-2003 W-2 and Related Programs Contract

1	W-2 Geographic Area(s)			
2	W-2 Agency Name and Address (street address for deliveries)			
3	Federal Employer Identification Number (FEIN)			
4	Agency Type: (check all that apply) <div style="display: flex; flex-wrap: wrap;"> <div style="width: 25%;"> <input type="checkbox"/> Government <input type="checkbox"/> County <input type="checkbox"/> Tribe </div> <div style="width: 25%;"> <input type="checkbox"/> Partnership <input type="checkbox"/> General <input type="checkbox"/> Limited </div> <div style="width: 25%;"> <input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other _____ </div> <div style="width: 25%;"> <input type="checkbox"/> For Profit <input type="checkbox"/> Non-profit Subsidiary of _____ </div> </div>			
5	Agency's Fiscal Year (check one) <input type="checkbox"/> Calendar <input type="checkbox"/> Other _____ through _____			
6	Consortium (if applicable) Name(s) of members:			
	W-2 Agency Personnel	Name, Title, and Mailing Address	Phone/FAX Numbers	INTERNET e-mail address
7	W-2 agency director (Contracts and related contract documents will be sent to this person.)		Phone:	
			Fax:	
8	Person responsible for program, day-to-day operations		Phone:	
			Fax:	

	W-2 Agency Personnel	Name, Title, and Mailing Address	Phone/FAX Numbers	INTERNET e-mail address
9	Chief Financial Officer (or equivalent position)		Phone:	
			Fax:	
10	Person responsible for fiscal day-to-day operations (if other than the Chief Financial Officer)		Phone:	
			Fax:	
11	Person responsible for Equal Opportunity/Civil Rights Compliance for applicants and employees		Phone:	
			Fax:	
12	Person named as the W-2 Agency's Contract Manager in the W-2 Contract		Phone:	
			Fax:	

The W-2 agency must submit any revisions to the information on this form within ten (10) business days to the Department's Contract Manager.

Signature
Agency Director's Name or Designee
(If designee, attach Designee Authorization)

Date

Name printed

ATTACHMENT B

PROPOSER AGENCY REFERENCES FORM (Not applicable to RFS agency Plan)

[Provide address, contact person, telephone number, and appropriate information of agencies or individuals which the Department can contact for reference in regard to work performed related to services required.]

Agency/Individual _____

Contact Person _____ Title _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone _____ Fax _____ E-mail _____

Work/Service Performed _____

Agency/Individual _____

Contact Person _____ Title _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone _____ Fax _____ E-mail _____

Work/Service Performed _____

Agency/Individual _____

Contact Person _____ Title _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone _____ Fax _____

Work/Service Performed _____

Attachment B: Proposer Agency References Form (continued)

Agency/Individual _____

Contact Person _____ Title _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone _____ Fax _____ E-mail _____

Work/Service Performed _____

Agency/Individual _____

Contact Person _____ Title _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone _____ Fax _____ E-mail _____

Work/Service Performed _____

Signature
Agency Director's Name or Designee
(If designee, attach Designee Authorization)

Date

Name printed

ATTACHMENT C

To the 2002-2003

_____ **W-2 Plan**
(insert agency name)

To Administer W-2 and Related Programs

AFFIDAVIT FORM (Required)

Indicate below if claiming a Minority Business Preference.

- ☐ Minority Business Preference (section 16.75(3m) of the Wisconsin Statutes) - Must be certified by the Wisconsin Department of Commerce. If you have questions concerning the certification process, contact the Wisconsin Department of Commerce, 8th Floor, 123 W. Washington Ave., P.O. Box 7970, Madison, Wisconsin 53707-7970, (608) 267-9550.

In signing this Form we also certify that we have not, either directly or indirectly, entered into any agreement or participated in any collusion or otherwise taken any action in restraint of free trade; that no attempt has been made to induce any other person or firm to submit or not to submit a Plan; that this Plan has been independently arrived at without collusion with any other W-2 agency; that the above statement is accurate under penalty of perjury.

In signing this Form we also certify that no relationship exists between our agency and the Department that interferes with fair competition or is a conflict of interest, and no relationship exists between our agency and another person or organization that constitutes a conflict of interest with respect to a State contract.

We will comply with all terms, conditions, and response items required by the State in the W-2 Right of First Selection Re-contracting documents, including the Department's Policies and Procedures, and the terms of our Plan.

Signature
Agency Director's Name or Designee
(If designee, attach Designee Authorization)

Date

Name printed

ATTACHMENT D

DESIGNATION OF CONFIDENTIAL AND PROPRIETARY INFORMATION FORM (Optional) (Not applicable to RFS agency Plan)

STATE OF WISCONSIN

DOA-3027 N(R01/98)

The attached material submitted in response to Bid/Proposal DWD-1808-GS includes proprietary and confidential information which qualifies as a trade secret, as provided in section 19.36(5) of the Wisconsin Statutes, or is otherwise material that can be kept confidential under the Wisconsin Open Records Law. As such, we ask that certain pages, as indicated below, of this bid/proposal response be treated as confidential material and not be released without our written approval.

Prices always become public information when contracts are awarded, and therefore cannot be kept confidential.

Other information cannot be kept confidential unless it is a trade secret. Trade secret is defined in section 134.90(1)(c) of the Wisconsin Statutes as follows: "Trade secret" means information, including a formula, pattern, compilation, program, device, method, technique or process to which all of the following apply:

1. The information derives independent economic value, actual or potential, from not being generally known to, and not being readily ascertainable by proper means by, other persons who can obtain economic value from its disclosure or use.
2. The information is the subject of efforts to maintain its secrecy that are reasonable under the circumstances.

We request that the following pages not be released

Section

Page #

Topic

IN THE EVENT THE DESIGNATION OF CONFIDENTIALITY OF THIS INFORMATION IS CHALLENGED, THE UNDERSIGNED HEREBY AGREES TO PROVIDE LEGAL COUNSEL OR OTHER NECESSARY ASSISTANCE TO DEFEND THE DESIGNATION OF CONFIDENTIALITY AND AGREES TO HOLD THE STATE HARMLESS FOR ANY COSTS OR DAMAGES ARISING OUT OF THE STATE'S AGREEING TO WITHHOLD THE MATERIALS.

Failure to include this form in the bid/proposal response may mean that all information provided as part of the bid/proposal response will be open to examination and copying. The State considers other markings of confidential in the bid/proposal document to be insufficient. The undersigned agrees to hold the State harmless for any damages arising out of the release of any materials unless they are specifically identified above.

Signature
Agency Director's Name or Designee
(If designee, attach Designee Authorization)

Date

Name printed

ATTACHMENT E
To the 2002-2003
_____W-2 Plan
(insert agency name)
To Administer W-2 and Related Programs

CERTIFICATION REGARDING DEBARMENT FORM (Required)

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 29 CFR Part 98, Section 98.510, Participants' responsibilities. The regulations were published as Part VII of the May 26, 1988 Federal Register (pages 19160-19211).

**(Before Completing Certification, Read Attached Instructions
Which Are an Integral Part of the Certification)**

1. The prospective participant certifies, by submission of this Plan, to the Department of Workforce Development, State of Wisconsin, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
2. Where the prospective participant is unable to certify to any of the statements in this certification, to the Department of Workforce Development, State of Wisconsin, such prospective participant shall attach an explanation to this Plan.

Signature
Agency Director's Name or Designee
(If designee, attach Designee Authorization)

Date

Name printed

Attachment E: Certification Regarding Debarment Form (Required) (continued)

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this bid/proposal, the prospective recipient of Federal assistance funds is providing the certification as set below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective recipient of Federal assistance funds knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the Department of Labor (DOL) may pursue available remedies, including suspension and/or debarment.
3. The prospective recipient of Federal assistance funds shall provide immediate written notice to the person to which this bid/proposal is submitted it at any time the prospective recipient of Federal assistance funds learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The term "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal, bid/proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person in which this bid/proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective recipient of Federal assistance funds agrees by submitting this bid/proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the DOL.
6. The prospective recipient of Federal assistance funds further agrees by submitting this bid/proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, declared ineligible, or voluntarily excluded from participation in the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may but is not required to check the List of Parties Excluded from Procurement or Nonprocurement Programs.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the DOL may pursue available remedies, including suspension and/or debarment.

ATTACHMENT F-1

To the 2002-2003

_____ W-2 Plan

(insert agency name)

To Administer W-2 and Related Programs

LOBBYING FORMS (Required)

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Signature
Agency Director's Name or Designee
(If designee, attach Designee Authorization)

Date

Name printed

ATTACHMENT F-2

To the 2002-2003

W-2 Plan

(insert agency name)

To Administer W-2 and Related Programs

DISCLOSURE OF LOBBYING ACTIVITIES FORM (Required for a W-2 agency that has lobbying activities.)

Approved by OMB

0348-0046

(Reproduced by DWD/DWS/BDS)

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

1. Type of Federal Action: a. contract b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance		2. Status of Federal Action: a. bid/offer/application b. initial award c. post award		3. Report Type: a. initial filing b. material change For Material Change Only: Year _____ quarter _____ Date of last report _____	
4. Name and Address of Reporting Entity: Prime _____ p Subawardee Tier _____, if known: Congressional District, if known:			5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime: Congressional District, if known:		
6. Federal Department/Agency:			7. Federal Program Name/Description: CFDA Number, if applicable:		
8. Federal Action Number, if known:			9. Award Amount, if known: \$		
10. a. Name and Address of Lobbying Entity (if individual, last name, first name, MI):			10. b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):		
11. Amount of Payment (check all that apply): \$ _____ actual _____ planned _____			13. Type of Payment (check all that apply): a. retainer b. one-time fee c. commission d. contingent fee e. deferred f. other; specify: _____		
12. Form of Payment (check all that apply): a. cash b. in-kind; specify: nature _____ value _____					
14. Brief Description of Services Performed or to be Performed and Date(s) of Service, including officer(s), employee(s), or Member(s) contacted, for Payment indicated in Item 11:					
15. Continuation Sheet(s) SF-LLL-A attached: _____ p Yes _____ p No					
16. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.				Signature: _____ Print Name: _____ Title: _____ Tele. No.: _____ Date: _____	

**DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET**

0348-0046
(cont.)

Reporting Entity: _____ Page _____ of _____

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Use the SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limit to subcontracts, subgrants ad contract awards under grants.
5. If the organization filing the report in item 4 checks (Subawardee), then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10.
 - (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered Federal action.
 - (b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. Enter the amount of compensation paid or reasonable expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
12. Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check the appropriate box(es). Check all boxes that apply. If other, specify nature.
14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
15. Check whether or not a SF-LLL-A Continuation Sheet(s) is attached.
16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D.C. 20503.

ATTACHMENT G

To the 2002-2003

_____ W-2 Plan

(insert agency name)

To Administer W-2 and Related Programs

**PARTICIPANTS TIME LIMITS CONFIDENTIALITY ACKNOWLEDGEMENT FORM
(Optional/Not applicable to RFS agency Plan)**

_____ (agency) has requested information on hand to serve cases, for the purpose of submitting a Plan for a W-2 implementation contract. On behalf of itself and its employees, contractors and agents, _____ (agency) agrees to protect the confidential status and prevent the unauthorized disclosure of this information and any other information received from the Department of Workforce Development which is designated to be confidential under section 49.83 of the Wisconsin Statutes. The persons authorized to receive this information from the Department are subject to the terms of section 49.83, which are as follows:

“49.83 Limitation on giving information. Except as provided under s. 49.32(9), (10), and (10m), no person may use or disclose information concerning applicants and recipients of relief funded by a relief block grant, aid to families with dependent children, Wisconsin works under ss. 49.141 to 49.161, social services, child and spousal support and establishment of paternity services under s. 49.22 or supplemental payments under s. 49.77 for any purpose not connected with the administration of the programs. Any person violating this section may be fined not less than \$25 nor more than \$500 or imprisoned in the county jail not less than 10 days nor more than one year or both.”

It is agreed that after its use for the purpose of preparing a W-2 Plan, the information received from the Department and any copies made will be returned to the Department.

Signature
Agency Director's Name or Designee
(If designee, attach Designee Authorization)

Date

Name printed

ATTACHMENT H

COST PROPOSAL FORM (Not applicable to RFS agency Plan)

W-2 Agency Name: _____

W-2 Geographic Area: _____
(Complete a separate form for each geographic area or consortium)

Total must not exceed the Contract Total provided in Appendix 9.3.1: Chart 1 for the geographic area(s).

Item	Cost
a) Personnel (salary and fringe benefits)	\$
b) Operational Expenses (e.g., participant services, space, travel, supplies)	\$
c) Subcontracts (excluding administrative costs)	\$
d) Administrative (including administrative costs for subcontracts) (must not exceed fifteen percent (15%) of total expenditures)	\$
e) Other (specify)	\$
f) Benefits (CSJs, W-2 T, Trial Jobs, Custodial Parent of an Infant)	\$
g) Total	\$

- a) Personnel – Identify all projected costs associated with W-2 agency employees’ salary and fringe benefits (except as identified under Administrative) related to delivery of services for W-2 and related programs.
- b) Operational Expenses – Identify projected costs which are necessary for the operation and delivery of services for W-2 and related programs.
- c) Subcontracts – Identify projected costs allocated for delivery of W-2 and related program services by all third party subcontractors.
- d) Administrative – Enter projected costs which are necessary for administrative oversight of W-2 and related programs and are not directly related to delivery of services for W-2 and related programs. This includes costs associated with Agency Management Support and Overhead (AMSO) that are allocated to W-2 and related programs and other costs. (See Appendix 9.2 to the RFP: Definitions and Acronyms .)
- e) Other - Identify projected costs not otherwise identified in a) through d) for W-2 and related programs and specify the type of cost.
- f) Benefits – Identify the agency’s projected cash payment benefit costs associated with W-2 T, CSJ, Trial Jobs and Custodial Parent of an Infant cases.
- g) Total for period 1/1/00 through 12/31/01 (2 years) - add lines (a) through (f).